

LOUISIANA

DEPARTMENT of REVENUE

Supplement Schedule for Refund of Louisiana Citizens Property Insurance Assessment

**Corporation or
Legal Entity**

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Legal Name	Louisiana Revenue Account Number
First and Last Name	Your Social Security Number

Individual Only

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If you have more than one property that incurred a Citizens assessment, use this form to identify those properties. You **must** use this form as an attachment to the following Louisiana income tax forms:

- Form IT-540, *Louisiana Resident Individual Income Tax Return*;
- Form IT-540B, *Louisiana Nonresident Individual Income Tax Return*;
- Form R-540INS, *Request for Refund of Louisiana Citizens Property Insurance Corporation Assessment For Individuals*;
- Form R-620INS, *Request for Refund of Louisiana Citizens Property Insurance Corporation Assessment For Corporation or Nontaxable Entity*; and
- Form GIFT-620, *Louisiana Corporation Income and Franchise Tax Return*.

The Declaration page supporting the credit claimed for each property must be attached in order to receive the credit. On Line 5, enter the total of the assessments claimed on this page.

1 Physical Address of Property:

Address 1 _____
 Address 2 _____
 City, State _____ ZIP _____
 Insurance Company _____
 Policy Number _____

Amount of Assessment _____ **.00**

2 Physical Address of Property:

Address 1 _____
 Address 2 _____
 City, State _____ ZIP _____
 Insurance Company _____
 Policy Number _____

Amount of Assessment _____ **.00**

3 Physical Address of Property:

Address 1 _____
 Address 2 _____
 City, State _____ ZIP _____
 Insurance Company _____
 Policy Number _____

Amount of Assessment _____ **.00**

4 Physical Address of Property:

Address 1 _____
 Address 2 _____
 City, State _____ ZIP _____
 Insurance Company _____
 Policy Number _____

Amount of Assessment _____ **.00**

5 Total amount of assessments claimed on this page **.00**